

## PART B - FEE(S) TRANSMLIAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



(571) 273-2885 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

75	90 09/30/2005	-n, thangs to mean tab,		Feet pape have	(s) Transmittal. T ers. Each addition e its own certifica	his certificate cannot be us his certificate cannot be us nal paper, such as an assi- ate of mailing or transmiss	ed for domestic mainings of the second for any other accompanying gnment or formal drawing, must ion.
Geoffrey R. Myer Hall, Priddy, Myers 10220 River Road,	s & Vande Sande Ste. 200			I he Stat addi	reby certify that	this Fee(s) Transmittal is	ransmission HADD - CAMPAIS being deposited with the United or first class mail in an envelope tress above, or being facsimile the date indicated below.
Potomac, MD 2085 2/06/2005 MBEYENE2 00000						. Pequignot,	
				<u> </u>	1 ilith		(Signature)
1 FC:1504 2 FC:2501	300.00 OF 700.00 OF 6.00 OD				12-5	5-2005	(Date)
3 FC18001 APPLICATION NO.	FILING DATE	FIRST NAMED INVENT				ATTORNEY DOCKET N	O. CONFIRMATION NO.
10/722,124		Leif Nennerfelt			6337.1043	4836	
TITLE OF INVENTION: PF	ROCESS FOR EXTRACTI	NG FLAX PROTEI	IN CONCEN	TRATE FRO	M FLAX MEAI	· ·	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	ISSUE FEE		CATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$700		\$300	\$1000	12/30/2005
EXAM	EXAMINER		ART UNIT		-SUBCLASS		
WAX, RO	WAX, ROBERT A		1653		-059000	_	
"Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	an assignee is identified be 37 CFR 3.11. Completion	ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT	2 registered listed, no service HE PATENT data will app a substitute	or patent attoname will be  (print or type or the print of filing an or the print of filing an or the print of filing and or the	-	tnee is identified below, t	he document has been filed for
	•						
			printed on the patent): Individual Corporation or other private group entity Government  4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0644 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated above MALL ENTITY status. See	e)	_			ALL ENTITY status. See	
The Director of the USPTO in NOTE: The Issue Fee and Puinterest as shown by the reco	is requested to apply the Issublication Fee (if required) ands of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	ion Fee (if ar from anyone Office.	ny) or to re-ar e other than th	oply any previous ne applicant; a re	sly paid issue fee to the apgistered attorney or agent;	plication identified above. or the assignee or other party in
Authorized Signature	with -	55			Date	12-5-2005	
Typed or printed name	Matthew A. Pec	quignot, E	sq.		Registratio	12-5-205 n No. 43,851	
This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313- Under the Paperwork Reduct	1430.						(and by the USPTO to process) luding gathering, preparing, and of time you require to complete Department of Commerce, P.O. oner for Patents, P.O. Box 1450, ntrol number.